

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.		1 ACCOUNT # (Ethics Commission Filers)	2 Total pages filed: 13
3 CANDIDATE / OFFICEHOLDER NAME	MS / MRS / MR FIRST MI Mr. L Gus		OFFICE USE ONLY Date Received Date Hand-delivered or Postmarked Receipt # Amount Date Processed Date Imaged CITY CLERK DEPT. 2013 APR 11 PM 2:07
	NICKNAME LAST SUFFIX Haddad		
4 CANDIDATE / OFFICEHOLDER MAILING ADDRESS <input type="checkbox"/> change of address	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 3128 El Paso, Texas 79923-3128		
5 CANDIDATE/ OFFICEHOLDER PHONE	AREA CODE PHONE NUMBER EXTENSION (915) 584-4487		
6 CAMPAIGN TREASURER NAME	MS / MRS / MR FIRST MI Mr. Joe A		
	NICKNAME LAST SUFFIX Rosales		
7 CAMPAIGN TREASURER ADDRESS (residence or business)	STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE 9613 Carnegie El Paso, Texas 79925		
8 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER EXTENSION (915) 591-3389		
9 REPORT TYPE	<input type="checkbox"/> January 15 <input checked="" type="checkbox"/> 30th day before election <input type="checkbox"/> Runoff <input type="checkbox"/> 15th day after campaign treasurer appointment (officeholder only) <input type="checkbox"/> July 15 <input type="checkbox"/> 8th day before election <input type="checkbox"/> Exceeded \$500 limit <input type="checkbox"/> Final report (Attach C/OH - FR)		
10 PERIOD COVERED	Month Day Year THROUGH Month Day Year 02 / 20 / 2013 04 / 10 / 2013		
11 ELECTION	ELECTION DATE ELECTION TYPE Month Day Year <input type="checkbox"/> Primary <input type="checkbox"/> Runoff <input checked="" type="checkbox"/> General <input type="checkbox"/> Special 05 / 11 / 2013		
12 OFFICE	OFFICE HELD (if any)	13 OFFICESOUGHT (if known) Mayor	
GO TO PAGE 2			

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

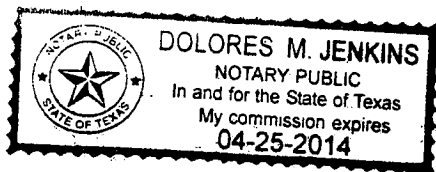
FORM C/OH COVER SHEET PG 2

14 C/OH NAME _____ 15 ACCOUNT # (Ethics Commission Filers) _____

16 NOTICE FROM POLITICAL COMMITTEE(S) <input type="checkbox"/> additional pages	<small>THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.</small>	
	COMMITTEE TYPE <input type="checkbox"/> GENERAL <input type="checkbox"/> SPECIFIC	COMMITTEE NAME _____ COMMITTEE ADDRESS _____ COMMITTEE CAMPAIGN TREASURER NAME _____ COMMITTEE CAMPAIGN TREASURER ADDRESS _____
	CITY CLERK DEPT. 2013 APR 1 PM 2:07	

17 CONTRIBUTION TOTALS	1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$
	2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$ 27,747.00
EXPENDITURE TOTALS	3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS, UNLESS ITEMIZED	\$
	4. TOTAL POLITICAL EXPENDITURES	\$ 19,477.00
CONTRIBUTION BALANCE	5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF REPORTING PERIOD	\$ 8,270.00
OUTSTANDING LOAN TOTALS	6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$

18 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

[Signature]

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Leo B. Haddad, this the 11th day of April, 20 13, to certify which, witness my hand and seal of office.

[Signature]
Signature of officer administering oath

Dolores M. Jenkins
Printed name of officer administering oath

[Signature]
Title of officer administering oath

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS**

CITY CLERK DEPT.

SCHEDULE A

2013 APR 11 PM 2:07

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME L Gus Haddad		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 2-21-13	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Hector Maldonado 6 Contributor address; City; State; Zip Code 6024 Palmdale El Paso, Texas 79932	7 Amount of contribution (\$) \$2500.00 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Investor		10 Employer (See Instructions)	
Date 2-28-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Charles and Mary Gaddy Contributor address; City; State; Zip Code 825 Cherry Hill Lane	Amount of contribution (\$) \$250.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions)	
Date 2-26-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Alejandra Cox Contributor address; City; State; Zip Code 162 N. Swall Drive, Apt 1, Beverly Hills, Ca 90211	Amount of contribution (\$) \$2500.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions)	
Date 3-01-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Thomas Fallon Contributor address; City; State; Zip Code 29 Moon Shell, Newport Coast, CA 92657	Amount of contribution (\$) \$2500.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions)	
Date 2-26-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Antonio Beltran Contributor address; City; State; Zip Code 3627 Durazano Ave., El Paso, Texas 79905	Amount of contribution (\$) \$2500.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions)	
<p align="center">ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED</p> <p align="center">If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.</p>			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

CITY CLERK DEPT. **SCHEDULE A**

2013 APR 11 PM 2:07

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME L Gus Haddad		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3-15-13	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Anthony Chica 6 Contributor address; City; State; Zip Code 6855 SW 40th Street, Miami, FL 33155	7 Amount of contribution (\$) \$2500.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) Investor		10 Employer (See Instructions)	
Date 3-16-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Doug Fallon Contributor address; City; State; Zip Code 7885 W. Sunset Rd., Ste 160, Las Vegas, NV 89113	Amount of contribution (\$) \$2500.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions)	
Date 3-31-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Marsha Chanoux Contributor address; City; State; Zip Code 622 Gary Ln., El Paso, Texas 79922	Amount of contribution (\$) \$200.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions)	
Date 4-1-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: George Safi Contributor address; City; State; Zip Code 8626 Golden Chord Cir., Houston, TX 77040	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 4-1-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Ward Esper Contributor address; City; State; Zip Code 6304 Franklin Vista Dr., El Paso, TX 79912	Amount of contribution (\$) 50.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

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SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A: 6	
2 FILER NAME L Gus Haddad		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 2-20-13	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Victor K. Kayrouz 6 Contributor address; City; State; Zip Code 2301 Zanzibar Rd. El Paso, Texas 79925	7 Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions)	
Date 2-20-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Joseph Russell Hanson Contributor address; City; State; Zip Code 1701 Tommy Aaron Dr. El Paso, Texas 79936	Amount of contribution (\$) \$500.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions)	
Date 2-20-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Bryan and Annette Haddad Contributor address; City; State; Zip Code 6393 Calle Placido El Paso, Texas 79912	Amount of contribution (\$) \$300.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions)	
Date 2-20-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Carolyn D. Tokoph Contributor address; City; State; Zip Code PO Box 12988 El Paso, Texas 79912	Amount of contribution (\$) \$2500.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions)	
Date 2-20-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Jason Roberts Contributor address; City; State; Zip Code 61 Enwood Heights San Antonio, Texas 78248	Amount of contribution (\$) \$2500.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Investor		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

CITY CLERK DEPT.

SCHEDULE A

2013 APR 11 PM 2:07

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME L Gus Haddad		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3-25-13	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Mrs. S. Safi 6 Contributor address; City; State; Zip Code 1520 Rocky Bluff, El Paso, TX 79902	7 Amount of contribution (\$) \$25.00 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) N/A		10 Employer (See Instructions)	
Date 4-6-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Leila Hobson Contributor address; City; State; Zip Code 6521 La Cadena, El Paso, Texas 79912	Amount of contribution (\$) \$50.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions)	
Date 3-28-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: George Salom Contributor address; City; State; Zip Code 807 S El Paso St., El Paso, Texas 79901	Amount of contribution (\$) \$150.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions)	
Date 4-2-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: John D. Wilbanks Contributor address; City; State; Zip Code 921 Thunderbird Dr., El Paso, TX 79912	Amount of contribution (\$) \$50.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions)	
Date 4-7-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: S.A. Safi Contributor address; City; State; Zip Code 755 Fairway Cir., El Paso, TX 79922	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

CITY CLERK DEPT.

2013 APR 11 PM 2:07

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME L Gus Haddad		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3-14-13	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Yusuf Farran 6 Contributor address; City; State; Zip Code PO Box 222003, El Paso, Texas 79913	7 Amount of contribution (\$) \$150.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
9 Principal occupation / Job title (See Instructions) N/A		10 Employer (See Instructions)	
Date 3-11-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Joe Rosales Contributor address; City; State; Zip Code 9104 Mettler St., El Paso, TX 79925	Amount of contribution (\$) \$2500.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) Retired		Employer (See Instructions)	
Date 4-1-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Arlene Carroll Contributor address; City; State; Zip Code 640 Willow Glen, El Paso, TX 79922	Amount of contribution (\$) \$300.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions)	
Date 3-16-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Howard Tischler Contributor address; City; State; Zip Code 6315 Greyleaf Trl., NE, Abq., NM 87111	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions)	
Date 3-25-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Katherine Davis Contributor address; City; State; Zip Code 4322 Santa Rita St., El Paso, Texas 79902	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T)	
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions)	

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

CITY CLERK DEPT.

2013 APR 11 PM 2:07

SCHEDULE A

The Instruction Guide explains how to complete this form.		1 Total pages Schedule A:	
2 FILER NAME L Gus Haddad		3 ACCOUNT # (Ethics Commission Filers)	
4 Date 3-22-13	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Ramsey Esper 6 Contributor address; City; State; Zip Code 5780 Diamond Point Cir., El Paso, TX 79912	7 Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T)	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) N/A		10 Employer (See Instructions)	
Date 3-21-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Joyce Haddad Contributor address; City; State; Zip Code 4009 Las Vegas Dr., El Paso, Tx 79902	Amount of contribution (\$) \$25.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions)	
Date 3-23-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Betty Boggs Contributor address; City; State; Zip Code 910 KE ReddRd., #531., El Paso, TX 79912	Amount of contribution (\$) \$100.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) N/A		Employer (See Instructions)	
Date 3-11-13	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Adam Frank Contributor address; City; State; Zip Code 106 Mesa Park Dr., El Paso, Texas 79912	Amount of contribution (\$) \$2147.00 (If travel outside of Texas, complete Schedule T)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) River Oaks Properties	
Date	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID#: Contributor address; City; State; Zip Code	Amount of contribution (\$)	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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PLEDGED CONTRIBUTIONS

CITY CLERK DEPT.
2013 APR 11 PM 2:07

SCHEDULE B

The Instruction Guide explains how to complete this form.		1 Total pages Schedule B: <div style="text-align: center; font-size: 1.2em;">1</div>	
2 FILER NAME <div style="text-align: center; font-size: 1.1em;">L Gus Haddad</div>		3 ACCOUNT # (Ethics Commission Filers)	
4 TOTAL OF UNITEMIZED PLEDGES: ⇒ ⇒ ⇒ ⇒ ⇒ ⇒			\$ n/a

5 Date	6 Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) 7 Pledgor address; City; State; Zip Code	8 Amount of pledge (\$) (If travel outside of Texas, complete Schedule T)	9 In-kind description (if applicable)
10 Principal occupation / Job title (See Instructions)		11 Employer (See Instructions)	

Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pledgor address; City; State; Zip Code	Amount of pledge (\$) (If travel outside of Texas, complete Schedule T)	In-kind description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pledgor address; City; State; Zip Code	Amount of pledge (\$) (If travel outside of Texas, complete Schedule T)	In-kind description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pledgor address; City; State; Zip Code	Amount of pledge (\$) (If travel outside of Texas, complete Schedule T)	In-kind description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

Date	Full name of pledgor <input type="checkbox"/> out-of-state PAC (ID#: _____) Pledgor address; City; State; Zip Code	Amount of pledge (\$) (If travel outside of Texas, complete Schedule T)	In-kind description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

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LOANS CITY CLERK DEPT. 2013 APR 11 PM 2:07		SCHEDULE E
The Instruction Guide explains how to complete this form.		1 Total pages Schedule E: 1
2 FILER NAME L Gus Haddad		3 ACCOUNT # (Ethics Commission Filers)
4 TOTAL OF UNITEMIZED LOANS: ⇒ ⇒ ⇒ ⇒ ⇒ ⇒		\$ n/a
5 Date of loan	7 Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	9 Loan Amount (\$)
6 Is lender a financial institution? Y N	8 Lender address; City; State; Zip Code	10 Interest rate
		11 Maturity date
12 Principal occupation / Job title (See Instructions)		13 Employer (See Instructions)
14 Description of Collateral <input type="checkbox"/> none		15 Check if personal funds were deposited into political account <input type="checkbox"/>
16 GUARANTOR INFORMATION <input type="checkbox"/> not applicable	17 Name of guarantor	19 Amount Guaranteed (\$)
	18 Guarantor address; City; State; Zip Code	
20 Principal Occupation (See Instructions)		21 Employer (See Instructions)
Date of loan	Name of lender <input type="checkbox"/> out-of-state PAC (ID#: _____)	Loan Amount (\$)
Is lender a financial institution? Y N	Lender address; City; State; Zip Code	Interest rate
		Maturity date
Principal occupation / Job title (See Instructions)		Employer (See Instructions)
Description of Collateral <input type="checkbox"/> none		Check if personal funds were deposited into political account <input type="checkbox"/>
GUARANTOR INFORMATION <input type="checkbox"/> not applicable	Name of guarantor	Amount Guaranteed (\$)
	Guarantor address; City; State; Zip Code	
Principal Occupation (See Instructions)		Employer (See Instructions)
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED If lender is out-of-state PAC, please see instruction guide for additional reporting requirements.		

POLITICAL EXPENDITURES

CITY CLERK DEPT.

2013 APR 11 PM 2:07

SCHEDULE F**EXPENDITURE CATEGORIES FOR BOX 8(a)**Advertising Expense
Accounting/Banking
Consulting Expense
Event Expense
FeesGift/Awards/Memorials Expense
Legal Services
Food/Beverage Expense
Polling Expense
Printing ExpenseSalaries/Wages/Contract Labor
Solicitation/Fundraising Expense
Travel In District
Travel Out Of District
Office Overhead/Rental ExpenseLoan Repayment/Reimbursement
Transportation Equipment & Related Expense
Contributions/Donations Made By
Candidate/Officeholder/Political Committee
OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME L Gus Haddad	3 ACCOUNT # (Ethics Commission Filers)
4 Date 3-13-13	5 Payee name Grodin Maresca Insurance & Associates	
6 Amount (\$) \$813.06	7 Payee address; City; State; Zip Code 945 S Mesa Hills Drive #A, El Paso, Texas 79912	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Fees	(b) Description (If travel outside of Texas, complete Schedule T)
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 3-13-13	Payee name Coyote Strategies	
Amount (\$) \$2000.00	Payee address; City; State; Zip Code 500 Overland, El Paso, Texas 79901	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 3-15-13	Payee name Coyote Strategies	
Amount (\$) \$3000.00	Payee address; City; State; Zip Code 500 Overland, El Paso, Texas 79901	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date 3-29-13	Payee name Morton Herbert LLC	
Amount (\$) \$1050.00	Payee address; City; State; Zip Code 306 W. Chesapeake Ave., Towson, Maryland 21204	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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POLITICAL EXPENDITURES

CITY CLERK DEPT.

SCHEDULE F

2013 APR 11 PM 2:07

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME L Gus Haddad	3 ACCOUNT # (Ethics Commission Filers)			
4 Date 2-22-13	5 Payee name Coyote Strategies				
6 Amount (\$) \$5000.00	7 Payee address; City; State; Zip Code 500 W Overland El Paso, Texas 79901				
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Consulting Expense	(b) Description (If travel outside of Texas, complete Schedule T)			
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table border="0"> <tr> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held			
Date 2-25-13	Payee name Coyote Strategies				
Amount (\$) \$1000.00	Payee address; City; State; Zip Code 500 W. Overland El Paso, Texas 79901				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T)			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table border="0"> <tr> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held			
Date 3-6-13	Payee name Coyote Strategies				
Amount (\$) \$1861.00	Payee address; City; State; Zip Code 500 W Overland El Paso, Texas 79901				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T)			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table border="0"> <tr> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held			
Date 3-13-13	Payee name Digital Signage				
Amount (\$) \$2000.00	Payee address; City; State; Zip Code 9300 Carnegie El Paso, Texas 79925				
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T)			
Complete <u>ONLY</u> if direct expenditure to benefit C/OH <table border="0"> <tr> <td>Candidate / Officeholder name</td> <td>Office sought</td> <td>Office held</td> </tr> </table>			Candidate / Officeholder name	Office sought	Office held
Candidate / Officeholder name	Office sought	Office held			

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

POLITICAL EXPENDITURES

CITY CLERK DEPT.

SCHEDULE F

2013 APR 11 PM 2:08

EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Gift/Awards/Memorials Expense	Salaries/Wages/Contract Labor	Loan Repayment/Reimbursement
Accounting/Banking	Legal Services	Solicitation/Fundraising Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Travel In District	Contributions/Donations Made By
Event Expense	Polling Expense	Travel Out Of District	Candidate/Officeholder/Political Committee
Fees	Printing Expense	Office Overhead/Rental Expense	OTHER (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F:	2 FILER NAME L Gus Haddad	3 ACCOUNT # (Ethics Commission Filers)
4 Date 4-13-13	5 Payee name Fast Signs	
6 Amount (\$) \$460.18	7 Payee address; City; State; Zip Code 4224 N. Mesa #F El Paso, Texas 79902	
8 PURPOSE OF EXPENDITURE	(a) Category (See categories listed at the top of this schedule) Printing Expense	(b) Description (If travel outside of Texas, complete Schedule T)
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name L Gus Haddad	Office sought Mayor Office held
Date 4-9-13	Payee name Coyote Strategies	
Amount (\$) \$2159.50	Payee address; City; State; Zip Code 500 Overland, El Paso, Texas 79901	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Consulting Expense	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name L Gus Haddad	Office sought Mayor Office held
Date 4-2-13	Payee name Regency Printing	
Amount (\$) \$133.15	Payee address; City; State; Zip Code 2313 Piedras, El Paso, Texas 79903	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule) Printing Expense	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held
Date	Payee name	
Amount (\$)	Payee address; City; State; Zip Code	
PURPOSE OF EXPENDITURE	Category (See categories listed at the top of this schedule)	Description (If travel outside of Texas, complete Schedule T)
Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought Office held

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